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Bib Data Sheet

CONFIRMATION NO. 7441

SERIAL NUMBER 10/681,400	FILING DATE 10/08/2003  RULE	CLASS 438	GROUP ART UNIT 2829	ATTORNEY DOCKET NO. TI-35902
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *NONE CME*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE CME*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/09/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <i>C. Kuehn</i> Examiner's Signature	Initials		

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## TITLE

Guard ring structure for a Schottky diode

FILING FEE  RECEIVED 1018	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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